1	•								-				
EATENT APPLICATION DE DETERMINATION RI Effective December 8, 2004								ORD	Application or Docket Number				
								101568.501					
CLAIMS AS FILED - PART I							SMALL ENTITY TYPE			OTHER THAN			
<b>L</b>	S NATIONAL	STACE FEED	(Column 1)			(Column 2)				OR -	SMALL	ENTITY	
U.S. NATIONAL STAGE FEES							_	RATE	FEE		RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LAF	IGE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	SA	
EX	AMINATION F	EE —————	Satisfies PCT Article 33(1)- (4) = \$50/\$100 U.S. is ISA = \$50/\$100			S 100 / \$ 200		EXAM FEE		1	EXAM FEE	27	
SEARCH FEE			0.5. IS ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		•	ther situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	47	
FEI	FOR EXTRA	SPEC. PGS.	mir	าบร 100 =		/50 =	] .	X \$ 125 =		1	X \$ 250 =	1,40	
TOTAL CHARGEABLE CLAIMS			l h m	inus:20 =	•		]	X \$ 25 =		OR	X \$ 50 =		
_	EPENDENT CL			ninus 3 =	•			X \$ 100 =		OR	X \$ 200 =		
_		DENT CLAIM PR				🗆		+\$180=		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2						-	TOTAL		OR	TOTAL	9/1/		
3-9-0 (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGH NUMI PREVIO PAID		ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 19	Minus	- 2	0	=		X \$ 25 =		OR	X \$ 50 =	/	
	Independent	2	Minus	<b></b> 3		= /		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT.		OR	TOTAL ADDIT		
Z	-16-04	(Column 1)	•			•							
2		CLAIMS REMAINING AFTER AMENDMENT		(Colum. HIGHE NUMBI PREVIOL PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 19	Minus	- 2	0	- /		X \$ 25 =		OR	X \$ 50 =		
	independent	· 2	Minus	···· 3		= /.	ı	X \$ 100 =		OR	X \$ 200 =	/.	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =	-/-		
								OTAL ADDIT. FEE		OR T	TOTAL ADDIT.		
			•								, ee _		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												-	
•	· rightest NVM	Der Previousty Paid	For (Total or Inde	pendent) is t	he high	est number found in	n the	appropriate box	in column 1.			1	

FORM PTO-875 (Rev. 02/2005)

Patent and Trademark Office - U.S. DEPARTMENT OF COMMERC